

ICNARC report on COVID-19 in critical care: Wales 26 March 2021

This report presents analyses of data on patients critically ill with confirmed COVID-19 reported to ICNARC up to 23:59 on 25 March 2021 from critical care units in Wales participating in the Case Mix Programme (the national clinical audit for adult critical care).

Data are reported separately for patients critically ill with confirmed COVID-19 at or after the admission to critical care:

- admitted from 1 September 2020 to date; and
- admitted up to 31 August 2020.

Reporting process

Critical care units participating in the Case Mix Programme are asked to:

- log a case with ICNARC by submitting a record, with minimal data, as soon as they have an admission with confirmed COVID-19;
- resubmit data, including first 24-hour physiology, as soon as possible after the end of the first 24 hours in critical care;
- resubmit data for the whole critical care stay, including critical care outcome and organ support, when the patient leaves critical care; and
- submit final data when the patient leaves acute hospital.

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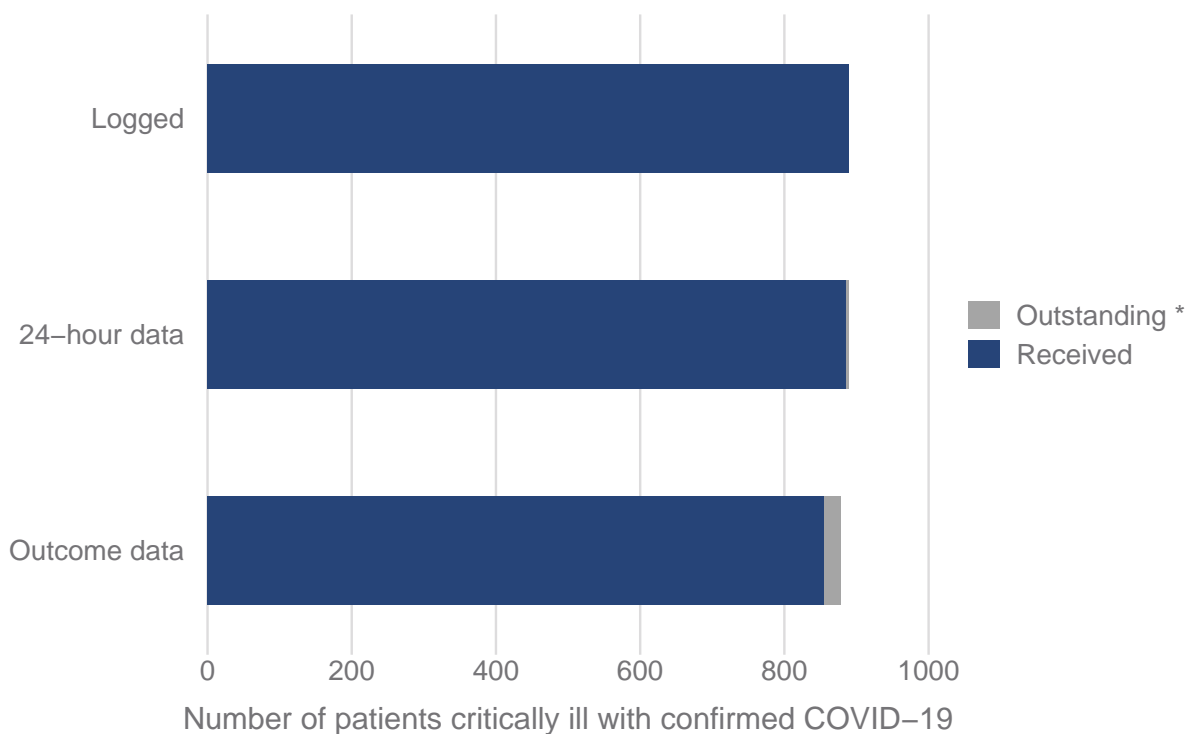
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* Please see individual notes for Tables/Figures.

Admissions to critical care

ICNARC have logged data for 964 admissions of 890 patients critically ill with confirmed COVID-19, either at or after the admission to critical care admitted from 1 September 2020 to date in Wales. Of these, data covering the first 24 hours of critical care have been submitted to ICNARC for 886 patients (Figure 1). Of the 890 total patients, 855 have outcomes reported and 35 patients were last reported as still receiving critical care. These patients are compared with a cohort of 403 patients with confirmed COVID-19 admitted up to 31 August 2020.



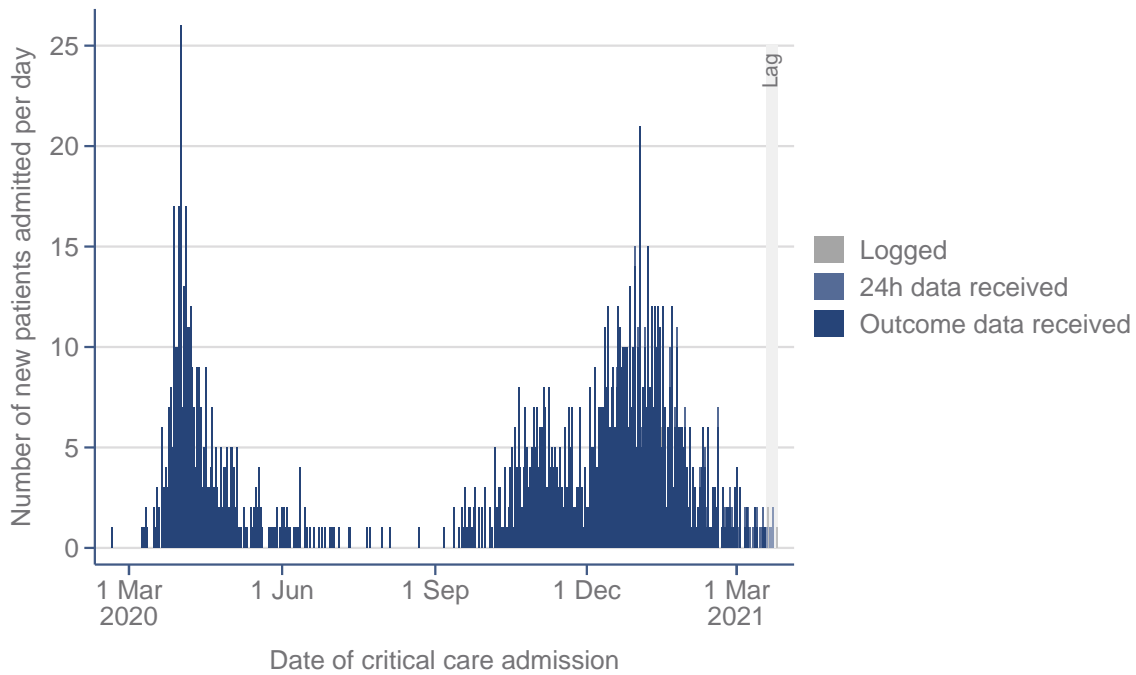
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Figure 1. Numbers of patients with data included in this report and outstanding *

Numbers of critically ill patients with confirmed COVID-19 admitted from 1 September 2020 to date with data included in this report and outstanding *.

* Please note that 24-hour data are considered outstanding when a case was logged at least 48 hours previously and outcome data are considered outstanding when 24-hour data have been received and at least 10 days have elapsed since the admission to critical care.

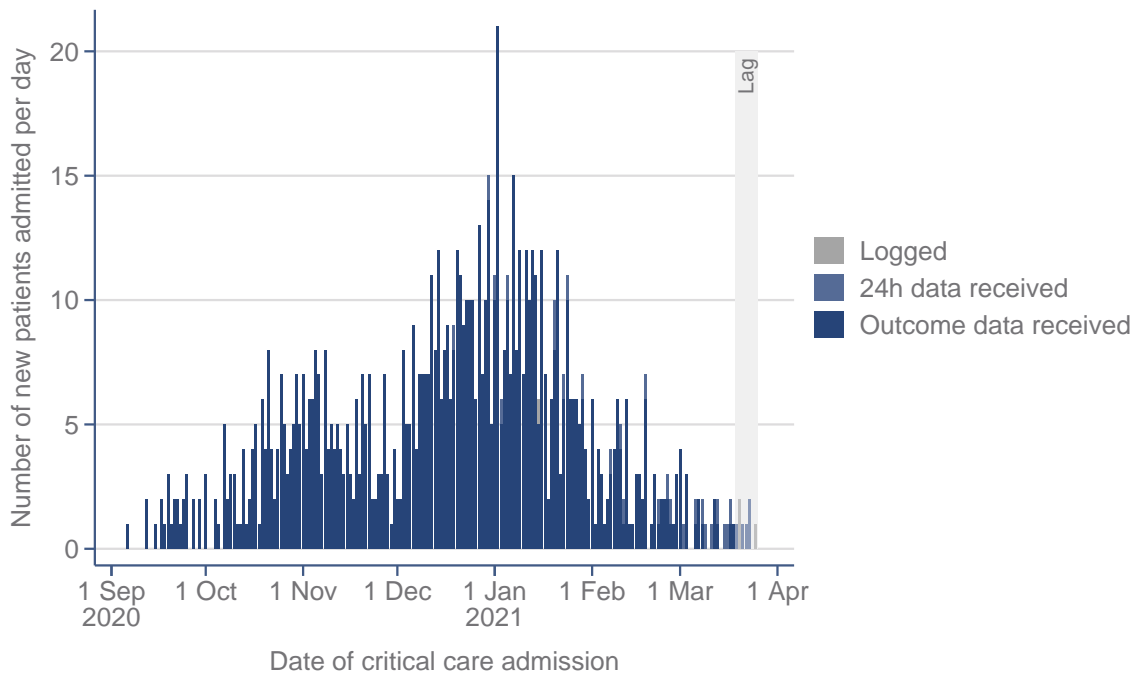
The numbers of new patients, cumulative numbers of patients and numbers of patients in critical care by date are shown in Figures 2-5. Please note that these figures are affected by a variable lag time for submission of data.



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Figure 2. Number of new patients by date of admission to critical care

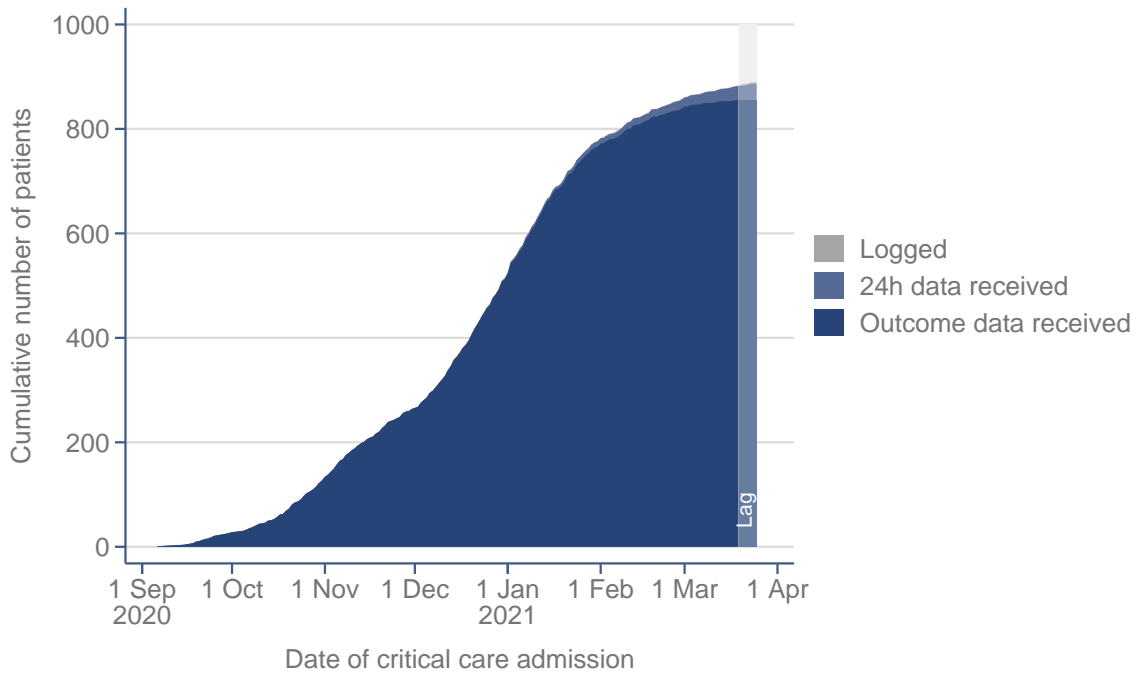
Number of new patients critically ill with confirmed COVID-19 by date of admissions to critical care over the entire epidemic.



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Figure 3. Number of new patients admitted from 1 September 2020 by date of admission to critical care

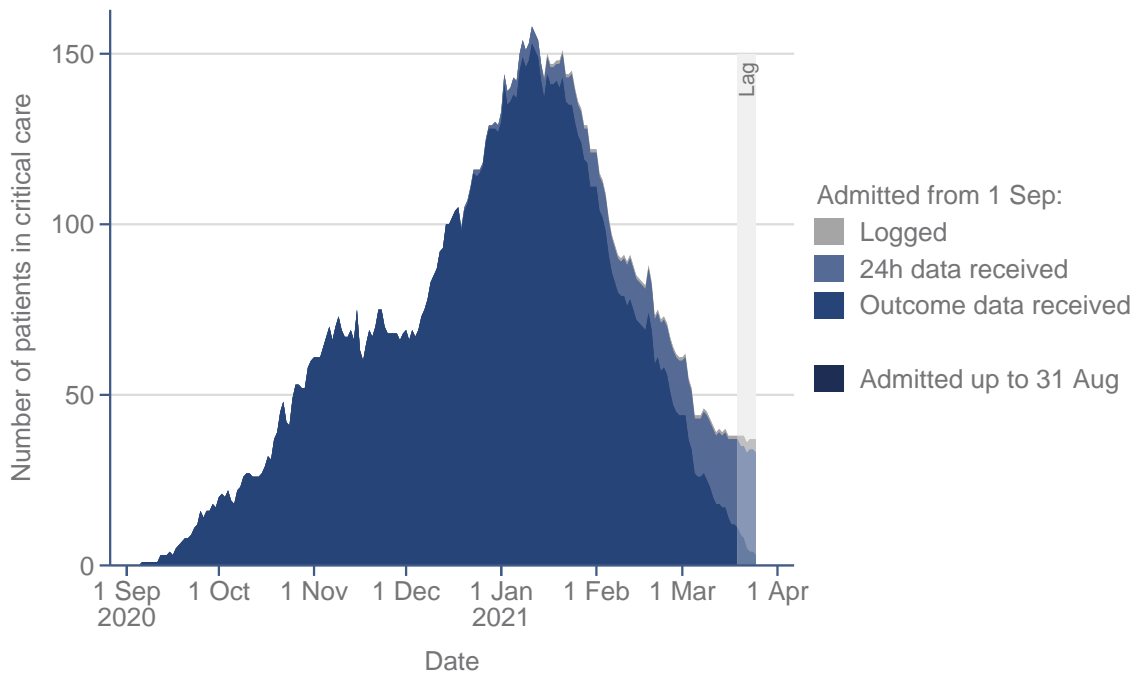
Number of new patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date by date of admission to critical care.



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Figure 4. Cumulative number of patients

Cumulative number of patients critically ill with confirmed COVID-19 admitted from 1 September 2020 by date of admission to critical care.



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Figure 5. Number of patients in critical care *

Number of patients with confirmed COVID-19 in critical care * from 1 September 2020 by date.

* Please note patients whose outcome data have not been received are assumed to remain in critical care as of 25 March 2021.

Patient characteristics

Characteristics of patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date are summarised in Tables 1-3 and compared with those admitted up to 31 August 2020.

Table 1. Patient characteristics: demographics

Demographics	Patients with confirmed COVID-19	
	Admitted from 1 Sep (N=890)	Admitted up to 31 Aug (N=403)
Age at admission (years) [N=890]		
Mean (SD)	58.8 (12.1)	57.0 (12.7)
Median (IQR)	60 (52, 68)	58 (50, 66)
Sex, n (%) [N=890]		
Female	298 (33.5)	132 (32.8)
Male	592 (66.5)	271 (67.2)
Ethnicity, n (%) [N=875]		
White	818 (93.5)	351 (87.3)
Mixed	6 (0.7)	6 (1.5)
Asian	40 (4.6)	25 (6.2)
Black	6 (0.7)	5 (1.2)
Other	5 (0.6)	15 (3.7)
Index of Multiple Deprivation (IMD) quintile *, n (%) [N=881]		
1 (least deprived)	131 (14.9)	57 (14.3)
2	149 (16.9)	63 (15.8)
3	140 (15.9)	72 (18.0)
4	202 (22.9)	85 (21.3)
5 (most deprived)	259 (29.4)	122 (30.6)

* Please see Definitions on page 40.

Table 2. Patient characteristics: medical history

Medical history	Patients with confirmed COVID-19	
	Admitted from 1 Sep (N=890)	Admitted up to 31 Aug (N=403)
Dependency prior to admission to acute hospital, n (%) [N=883]		
Able to live without assistance in daily activities	752 (85.2)	358 (88.8)
Some assistance with daily activities	130 (14.7)	44 (10.9)
Total assistance with all daily activities	1 (0.1)	1 (0.2)
Very severe comorbidities *, n (%) [N=886]		
Cardiovascular	5 (0.6)	3 (0.7)
Respiratory	17 (1.9)	7 (1.7)
Renal	16 (1.8)	2 (0.5)
Liver	6 (0.7)	1 (0.2)
Metastatic disease	2 (0.2)	2 (0.5)
Haematological malignancy	17 (1.9)	5 (1.2)
Immunocompromised	35 (4.0)	12 (3.0)
Body mass index *, n (%) [N=876]		
<18.5	1 (0.1)	1 (0.2)
18.5-<25	182 (20.8)	116 (28.8)
25-<30	264 (30.1)	137 (34.0)
30-<40	327 (37.3)	118 (29.3)
≥40	102 (11.6)	31 (7.7)
CPR within previous 24h, n (%) [N=884]		
In the community	12 (1.4)	3 (0.7)
In hospital	10 (1.1)	1 (0.2)
Prior hospital length of stay [N=888]		
Mean (SD)	4.0 (7.4)	2.4 (5.5)
Median (IQR)	2 (0, 5)	1 (0, 3)
Currently or recently pregnant, n (% of females aged 16-49) [N=76]		
Currently pregnant	3 (3.9)	0 (0.0)
Recently pregnant (within 6 weeks)	4 (5.3)	1 (2.4)
Not known to be pregnant	69 (90.8)	40 (97.6)

* Please see Definitions on page 40.

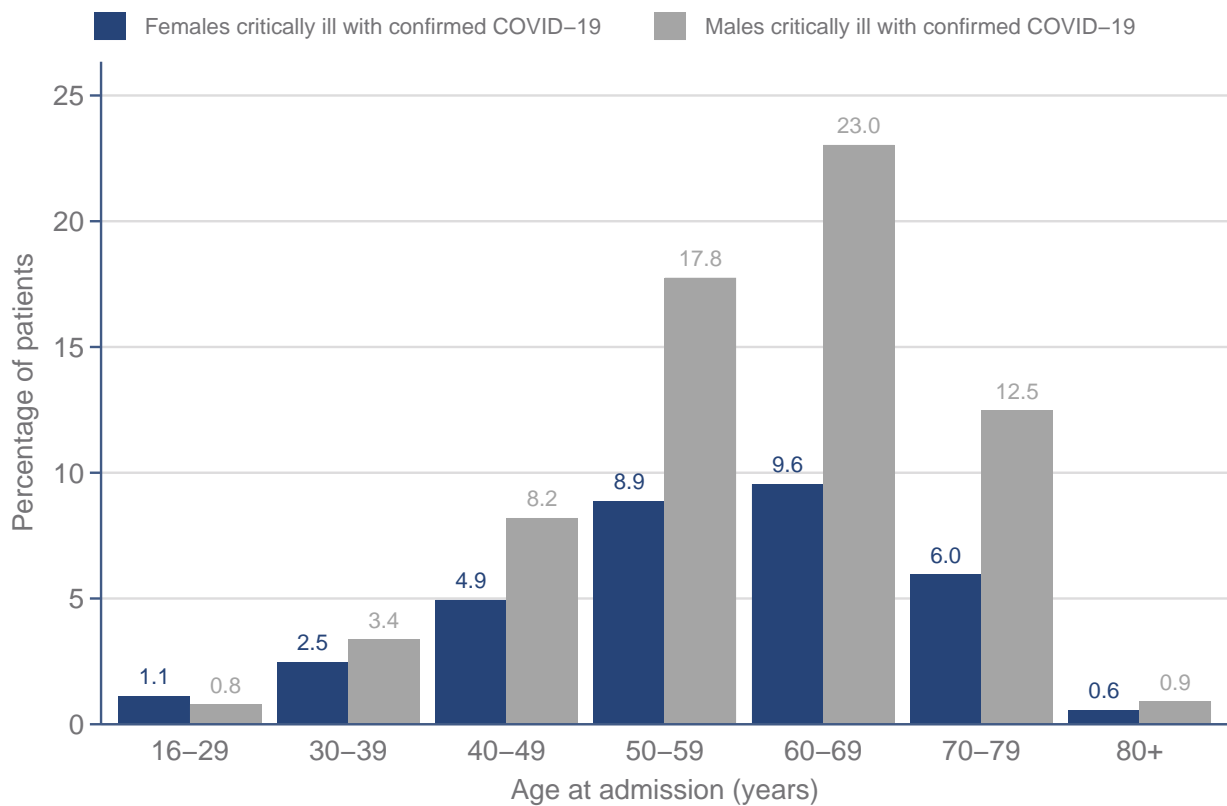
Table 3. Patient characteristics: indicators of acute severity

Indicators of acute severity	Patients with confirmed COVID-19 and 24h data received	
	Admitted from 1 Sep (N=886)	Admitted up to 31 Aug (N=403)
Invasively ventilated within first 24h *, n (%) [N=873]	448 (51.3)	266 (68.7)
APACHE II Score [N=882]		
Mean (SD)	15.1 (5.4)	14.5 (5.7)
Median (IQR)	15 (11, 18)	14 (11, 17)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=859]	12.7 (9.1, 18.3)	17.5 (12.3, 23.5)
PaO ₂ /FiO ₂ ratio †, n (%) [N=859]		
< 13.3 kPa (< 100 mmHg)	464 (54.0)	119 (31.1)
13.3-26.6 kPa (100-200 mmHg)	309 (36.0)	203 (53.0)
≥ 26.7 kPa (≥ 200 mmHg)	86 (10.0)	61 (15.9)
FiO ₂ †, median (IQR) [N=859]	0.65 (0.45, 0.80)	0.50 (0.40, 0.70)

* Please see Definitions on page 40. Indicators of acute severity are based on data from the first 24 hours of critical care.

† Derived from the arterial blood gas with the lowest PaO₂ during the first 24 hours of critical care.

The distribution of age and sex for patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date is presented in Figure 6.

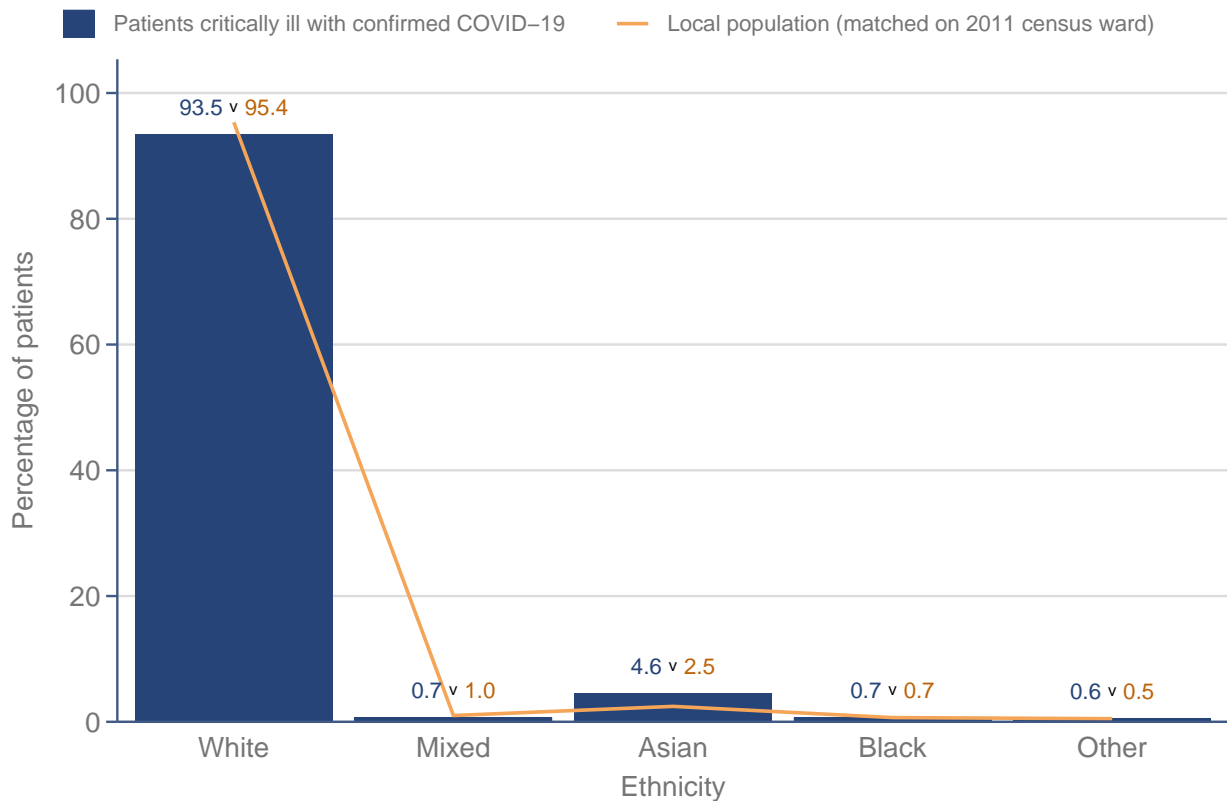


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Figure 6. Age and sex distribution

Age and sex distribution of patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date.

The distribution of ethnicity for patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date, compared with a local population matched on 2011 census ward for residence of patients critically ill with COVID-19, is presented in Figure 7.

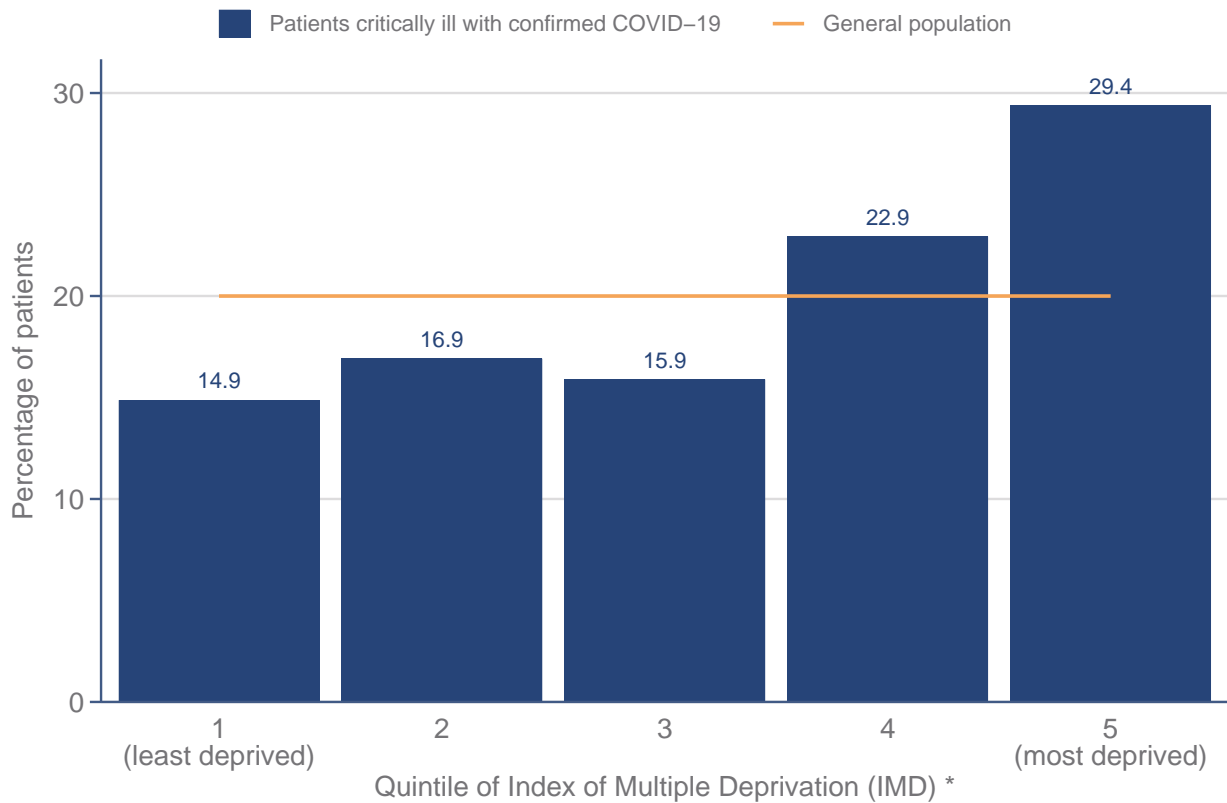


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Figure 7. Ethnicity distribution compared with the local population

Ethnicity distribution of patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date compared with the local population (linked to 2011 census ward).

The distribution of Index of Multiple Deprivation (IMD) for patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date, compared with the general population, is presented in Figure 8.



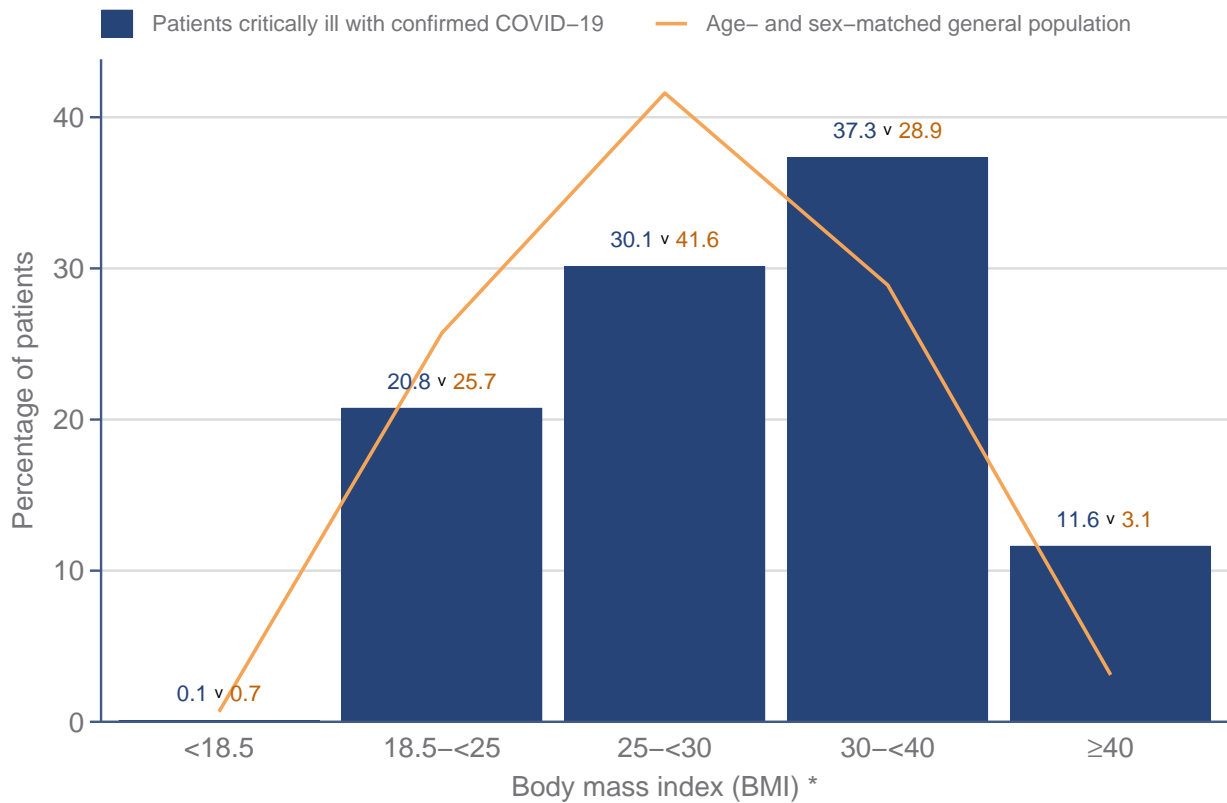
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Figure 8. Index of Multiple Deprivation * distribution compared with the general population

Index of Multiple Deprivation (IMD) * distribution of patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date compared with the general population.

* Please see Definitions on page 40.

The distribution of body mass index (BMI) for patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date, compared with an age- and sex-matched population (from the Health Survey for England 2018), is presented in Figure 9.



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Figure 9. Body mass index * distribution compared with the age- and sex-matched general population

Body mass index (BMI) * distribution of patients critically ill with confirmed COVID-19 admitted from 1 September 2020 compared with the age- and sex-matched general population (Health Survey for England 2018).

* Please see Definitions on page 40.

Patient characteristics – invasively ventilated first 24 hours

Characteristics of patients critically ill with confirmed COVID-19 and receiving invasive ventilation during the first 24 hours in critical care admitted from 1 September 2020 to date are summarised in Tables 4-6 and compared with those admitted up to 31 August 2020.

Table 4. Patient characteristics: demographics (invasively ventilated first 24 hours)

Patients with confirmed COVID-19 invasively ventilated first 24 hours *		
Demographics	Admitted from 1 Sep (N=448)	Admitted up to 31 Aug (N=266)
Age at admission (years) [N=448]		
Mean (SD)	59.8 (11.7)	57.1 (11.9)
Median (IQR)	61 (53, 68)	58 (50, 65)
Sex, n (%) [N=448]		
Female	136 (30.4)	81 (30.5)
Male	312 (69.6)	185 (69.5)
Ethnicity, n (%) [N=441]		
White	400 (90.7)	225 (84.6)
Mixed	6 (1.4)	3 (1.1)
Asian	27 (6.1)	18 (6.8)
Black	4 (0.9)	5 (1.9)
Other	4 (0.9)	15 (5.6)
Index of Multiple Deprivation (IMD) quintile *, n (%) [N=442]		
1 (least deprived)	63 (14.3)	32 (12.1)
2	59 (13.3)	36 (13.6)
3	67 (15.2)	50 (18.9)
4	101 (22.9)	57 (21.5)
5 (most deprived)	152 (34.4)	90 (34.0)

* Please see Definitions on page 40.

Table 5. Patient characteristics: medical history (invasively ventilated first 24 hours)

Patients with confirmed COVID-19 invasively ventilated first 24 hours *		
Medical history	Admitted from 1 Sep (N=448)	Admitted up to 31 Aug (N=266)
Dependency prior to admission to acute hospital, n (%) [N=445]		
Able to live without assistance in daily activities	389 (87.4)	242 (91.0)
Some assistance with daily activities	55 (12.4)	24 (9.0)
Total assistance with all daily activities	1 (0.2)	0 (0.0)
Very severe comorbidities *, n (%) [N=446]		
Cardiovascular	1 (0.2)	1 (0.4)
Respiratory	2 (0.4)	2 (0.8)
Renal	3 (0.7)	1 (0.4)
Liver	4 (0.9)	1 (0.4)
Metastatic disease	2 (0.4)	0 (0.0)
Haematological malignancy	7 (1.6)	3 (1.1)
Immunocompromised	17 (3.8)	4 (1.5)
Body mass index *, n (%) [N=445]		
<18.5	0 (0.0)	1 (0.4)
18.5-<25	86 (19.3)	67 (25.2)
25-<30	147 (33.0)	95 (35.7)
30-<40	159 (35.7)	88 (33.1)
≥40	53 (11.9)	15 (5.6)
CPR within previous 24h, n (%) [N=448]		
In the community	12 (2.7)	3 (1.1)
In hospital	9 (2.0)	1 (0.4)
Prior hospital length of stay [N=448]		
Mean (SD)	4.2 (6.2)	2.2 (5.8)
Median (IQR)	2 (0, 5)	1 (0, 2)
Currently or recently pregnant, n (% of females aged 16-49) [N=30]		
Currently pregnant	2 (6.7)	0 (0.0)
Recently pregnant (within 6 weeks)	1 (3.3)	1 (3.8)
Not known to be pregnant	27 (90.0)	25 (96.2)

* Please see Definitions on page 40.

Table 6. Patient characteristics: indicators of acute severity (invasively ventilated first 24 hours)

Patients with confirmed COVID-19 invasively ventilated first 24 hours *		
Indicators of acute severity	Admitted from 1 Sep (N=448)	Admitted up to 31 Aug (N=266)
APACHE II Score [N=448]		
Mean (SD)	16.2 (5.0)	14.8 (5.6)
Median (IQR)	16 (13, 19)	14 (11, 18)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=443]		
	12.3 (8.2, 17.6)	17.3 (11.9, 23.0)
PaO ₂ /FiO ₂ ratio †, n (%) [N=443]		
< 13.3 kPa (< 100 mmHg)	250 (56.4)	88 (33.3)
13.3-26.6 kPa (100-200 mmHg)	156 (35.2)	141 (53.4)
≥ 26.7 kPa (≥ 200 mmHg)	37 (8.4)	35 (13.3)
FiO ₂ †, median (IQR) [N=443]		
	0.70 (0.50, 0.90)	0.52 (0.40, 0.70)

* Please see Definitions on page 40. Indicators of acute severity are based on data from the first 24 hours of critical care.

† Derived from the arterial blood gas with the lowest PaO₂ during the first 24 hours of critical care.

Patient characteristics – advanced respiratory support

Characteristics of patients critically ill with confirmed COVID-19 that received advanced respiratory support at any time during their critical care stay admitted from 1 September 2020 to date are summarised in Tables 7-9 and compared with those admitted up to 31 August 2020.

Table 7. Patient characteristics: demographics (any advanced respiratory support)

Patients with confirmed COVID-19 and any advanced respiratory support *		
Demographics	Admitted from 1 Sep (N=603)	Admitted up to 31 Aug (N=325)
Age at admission (years) [N=603]		
Mean (SD)	59.5 (11.8)	57.6 (11.7)
Median (IQR)	61 (52, 68)	58 (50, 66)
Sex, n (%) [N=603]		
Female	193 (32.0)	100 (30.8)
Male	410 (68.0)	225 (69.2)
Ethnicity, n (%) [N=597]		
White	549 (92.0)	281 (86.5)
Mixed	6 (1.0)	4 (1.2)
Asian	34 (5.7)	20 (6.2)
Black	3 (0.5)	5 (1.5)
Other	5 (0.8)	15 (4.6)
Index of Multiple Deprivation (IMD) quintile *, n (%) [N=598]		
1 (least deprived)	89 (14.9)	42 (13.0)
2	93 (15.6)	50 (15.5)
3	90 (15.1)	57 (17.7)
4	140 (23.4)	69 (21.4)
5 (most deprived)	186 (31.1)	104 (32.3)

* Please see Definitions on page 40.

Table 8. Patient characteristics: medical history (any advanced respiratory support)

Patients with confirmed COVID-19 and any advanced respiratory support *		
Medical history	Admitted from 1 Sep (N=603)	Admitted up to 31 Aug (N=325)
Dependency prior to admission to acute hospital, n (%) [N=602]		
Able to live without assistance in daily activities	523 (86.9)	290 (89.2)
Some assistance with daily activities	79 (13.1)	35 (10.8)
Total assistance with all daily activities	0 (0.0)	0 (0.0)
Very severe comorbidities *, n (%) [N=602]		
Cardiovascular	1 (0.2)	2 (0.6)
Respiratory	7 (1.2)	4 (1.2)
Renal	8 (1.3)	1 (0.3)
Liver	5 (0.8)	1 (0.3)
Metastatic disease	2 (0.3)	0 (0.0)
Haematological malignancy	11 (1.8)	4 (1.2)
Immunocompromised	28 (4.7)	8 (2.5)
Body mass index *, n (%) [N=603]		
<18.5	0 (0.0)	1 (0.3)
18.5-<25	128 (21.2)	98 (30.2)
25-<30	191 (31.7)	109 (33.5)
30-<40	219 (36.3)	98 (30.2)
≥40	65 (10.8)	19 (5.8)
CPR within previous 24h, n (%) [N=603]		
In the community	11 (1.8)	3 (0.9)
In hospital	9 (1.5)	1 (0.3)
Prior hospital length of stay [N=603]		
Mean (SD)	4.2 (6.9)	2.2 (5.5)
Median (IQR)	2 (0, 5)	1 (0, 2)
Currently or recently pregnant, n (% of females aged 16-49) [N=49]		
Currently pregnant	3 (6.1)	0 (0.0)
Recently pregnant (within 6 weeks)	2 (4.1)	1 (3.2)
Not known to be pregnant	44 (89.8)	30 (96.8)

* Please see Definitions on page 40.

Table 9. Patient characteristics: indicators of acute severity (any advanced respiratory support)

Patients with confirmed COVID-19 and any advanced respiratory support *		
Indicators of acute severity	Admitted from 1 Sep (N=603)	Admitted up to 31 Aug (N=325)
APACHE II Score [N=602]		
Mean (SD)	15.8 (5.1)	14.8 (5.5)
Median (IQR)	15 (12, 19)	14 (11, 18)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=592]		
	11.6 (8.4, 16.6)	16.8 (11.9, 23.0)
PaO ₂ /FiO ₂ ratio †, n (%) [N=592]		
< 13.3 kPa (< 100 mmHg)	357 (60.3)	104 (33.3)
13.3-26.6 kPa (100-200 mmHg)	191 (32.3)	164 (52.6)
≥ 26.7 kPa (≥ 200 mmHg)	44 (7.4)	44 (14.1)
FiO ₂ †, median (IQR) [N=592]		
	0.70 (0.50, 0.90)	0.52 (0.40, 0.70)

* Please see Definitions on page 40. Indicators of acute severity are based on data from the first 24 hours of critical care.

† Derived from the arterial blood gas with the lowest PaO₂ during the first 24 hours of critical care.

Patient characteristics – basic respiratory support only

Characteristics of patients critically ill with confirmed COVID-19 that received basic respiratory support only during their critical care stay admitted from 1 September 2020 to date are summarised in Tables 10-12 and compared with those admitted up to 31 August 2020.

Table 10. Patient characteristics: demographics (basic respiratory support only)

Patients with confirmed COVID-19 and basic respiratory support only *		
Demographics	Admitted from 1 Sep (N=229)	Admitted up to 31 Aug (N=66)
Age at admission (years) [N=229]		
Mean (SD)	57.8 (12.7)	54.3 (15.9)
Median (IQR)	58 (51, 66)	56 (41, 65)
Sex, n (%) [N=229]		
Female	84 (36.7)	28 (42.4)
Male	145 (63.3)	38 (57.6)
Ethnicity, n (%) [N=226]		
White	220 (97.3)	60 (92.3)
Mixed	0 (0.0)	2 (3.1)
Asian	5 (2.2)	3 (4.6)
Black	1 (0.4)	0 (0.0)
Other	0 (0.0)	0 (0.0)
Index of Multiple Deprivation (IMD) quintile *, n (%) [N=228]		
1 (least deprived)	40 (17.5)	11 (16.9)
2	47 (20.6)	12 (18.5)
3	35 (15.4)	12 (18.5)
4	50 (21.9)	14 (21.5)
5 (most deprived)	56 (24.6)	16 (24.6)

* Please see Definitions on page 40.

Table 11. Patient characteristics: medical history (basic respiratory support only)

Patients with confirmed COVID-19 and basic respiratory support only *		
Medical history	Admitted from 1 Sep (N=229)	Admitted up to 31 Aug (N=66)
Dependency prior to admission to acute hospital, n (%) [N=229]		
Able to live without assistance in daily activities	182 (79.5)	58 (87.9)
Some assistance with daily activities	47 (20.5)	7 (10.6)
Total assistance with all daily activities	0 (0.0)	1 (1.5)
Very severe comorbidities *, n (%) [N=229]		
Cardiovascular	4 (1.7)	0 (0.0)
Respiratory	8 (3.5)	2 (3.0)
Renal	6 (2.6)	1 (1.5)
Liver	0 (0.0)	0 (0.0)
Metastatic disease	0 (0.0)	1 (1.5)
Haematological malignancy	5 (2.2)	1 (1.5)
Immunocompromised	6 (2.6)	3 (4.5)
Body mass index *, n (%) [N=228]		
<18.5	1 (0.4)	0 (0.0)
18.5-<25	36 (15.8)	12 (18.2)
25-<30	64 (28.1)	25 (37.9)
30-<40	96 (42.1)	19 (28.8)
≥40	31 (13.6)	10 (15.2)
CPR within previous 24h, n (%) [N=229]		
In the community	0 (0.0)	0 (0.0)
In hospital	1 (0.4)	0 (0.0)
Prior hospital length of stay [N=229]		
Mean (SD)	3.5 (8.2)	3.1 (5.3)
Median (IQR)	1 (0, 3)	1 (0, 4)
Currently or recently pregnant, n (% of females aged 16-49) [N=20]		
Currently pregnant	0 (0.0)	0 (0.0)
Recently pregnant (within 6 weeks)	1 (5.0)	0 (0.0)
Not known to be pregnant	19 (95.0)	10 (100.0)

* Please see Definitions on page 40.

Table 12. Patient characteristics: indicators of acute severity (basic respiratory support only)

Patients with confirmed COVID-19 and basic respiratory support only *		
Indicators of acute severity	Admitted from 1 Sep (N=229)	Admitted up to 31 Aug (N=66)
APACHE II Score [N=228]		
Mean (SD)	13.9 (5.6)	13.0 (5.9)
Median (IQR)	13 (10, 16)	12 (9, 16)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=226]	14.2 (11.1, 20.5)	19.8 (13.8, 23.9)
PaO ₂ /FiO ₂ ratio †, n (%) [N=226]		
< 13.3 kPa (< 100 mmHg)	96 (42.5)	15 (24.6)
13.3-26.6 kPa (100-200 mmHg)	103 (45.6)	36 (59.0)
≥ 26.7 kPa (≥ 200 mmHg)	27 (11.9)	10 (16.4)
FiO ₂ †, median (IQR) [N=226]	0.60 (0.40, 0.70)	0.40 (0.35, 0.60)

* Please see Definitions on page 40. Indicators of acute severity are based on data from the first 24 hours of critical care.

† Derived from the arterial blood gas with the lowest PaO₂ during the first 24 hours of critical care.

Patient characteristics – renal support

Characteristics of patients critically ill with confirmed COVID-19 that received renal support at any time during their critical care stay admitted from 1 September 2020 to date are summarised in Tables 13-15 and compared with those admitted up to 31 August 2020.

Table 13. Patient characteristics: demographics (any renal support)

Demographics	Patients with confirmed COVID-19 and any renal support *	
	Admitted from 1 Sep (N=192)	Admitted up to 31 Aug (N=123)
Age at admission (years) [N=192]		
Mean (SD)	60.6 (10.3)	57.9 (11.9)
Median (IQR)	62 (55, 68)	59 (50, 67)
Sex, n (%) [N=192]		
Female	52 (27.1)	27 (22.0)
Male	140 (72.9)	96 (78.0)
Ethnicity, n (%) [N=191]		
White	176 (92.1)	103 (83.7)
Mixed	0 (0.0)	3 (2.4)
Asian	12 (6.3)	9 (7.3)
Black	2 (1.0)	3 (2.4)
Other	1 (0.5)	5 (4.1)
Index of Multiple Deprivation (IMD) quintile *, n (%) [N=189]		
1 (least deprived)	26 (13.8)	12 (9.9)
2	25 (13.2)	15 (12.4)
3	25 (13.2)	19 (15.7)
4	50 (26.5)	31 (25.6)
5 (most deprived)	63 (33.3)	44 (36.4)

* Please see Definitions on page 40.

Table 14. Patient characteristics: medical history (any renal support)

Patients with confirmed COVID-19 and any renal support *		
Medical history	Admitted from 1 Sep (N=192)	Admitted up to 31 Aug (N=123)
Dependency prior to admission to acute hospital, n (%) [N=191]		
Able to live without assistance in daily activities	160 (83.8)	110 (89.4)
Some assistance with daily activities	31 (16.2)	13 (10.6)
Total assistance with all daily activities	0 (0.0)	0 (0.0)
Very severe comorbidities *, n (%) [N=191]		
Cardiovascular	1 (0.5)	1 (0.8)
Respiratory	4 (2.1)	2 (1.6)
Renal	15 (7.9)	2 (1.6)
Liver	1 (0.5)	1 (0.8)
Metastatic disease	0 (0.0)	0 (0.0)
Haematological malignancy	3 (1.6)	1 (0.8)
Immunocompromised	11 (5.8)	2 (1.6)
Body mass index *, n (%) [N=192]		
<18.5	0 (0.0)	0 (0.0)
18.5-<25	34 (17.7)	32 (26.0)
25-<30	64 (33.3)	41 (33.3)
30-<40	67 (34.9)	42 (34.1)
≥40	27 (14.1)	8 (6.5)
CPR within previous 24h, n (%) [N=192]		
In the community	3 (1.6)	1 (0.8)
In hospital	1 (0.5)	0 (0.0)
Prior hospital length of stay [N=192]		
Mean (SD)	5.1 (10.0)	1.9 (4.1)
Median (IQR)	3 (0, 6)	0 (0, 2)
Currently or recently pregnant, n (% of females aged 16-49) [N=11]		
Currently pregnant	0 (0.0)	0 (0.0)
Recently pregnant (within 6 weeks)	0 (0.0)	0 (0.0)
Not known to be pregnant	11 (100.0)	10 (100.0)

* Please see Definitions on page 40.

Table 15. Patient characteristics: indicators of acute severity (any renal support)

Indicators of acute severity	Patients with confirmed COVID-19 and any renal support *	
	Admitted from 1 Sep (N=192)	Admitted up to 31 Aug (N=123)
Invasively ventilated within first 24h *, n (%) [N=191]	130 (68.1)	91 (78.4)
APACHE II Score [N=191]		
Mean (SD)	17.6 (5.8)	16.9 (6.8)
Median (IQR)	17 (14, 21)	16 (12, 21)
PaO ₂ /FiO ₂ ratio † (kPa), median (IQR) [N=189]	12.4 (8.6, 17.8)	16.5 (10.8, 23.5)
PaO ₂ /FiO ₂ ratio †, n (%) [N=189]		
< 13.3 kPa (< 100 mmHg)	105 (55.6)	46 (39.0)
13.3-26.6 kPa (100-200 mmHg)	69 (36.5)	55 (46.6)
≥ 26.7 kPa (≥ 200 mmHg)	15 (7.9)	17 (14.4)
FiO ₂ †, median (IQR) [N=189]	0.65 (0.50, 0.80)	0.55 (0.40, 0.75)

* Please see Definitions on page 40. Indicators of acute severity are based on data from the first 24 hours of critical care.

† Derived from the arterial blood gas with the lowest PaO₂ during the first 24 hours of critical care.

Outcomes, duration of critical care and organ support

Critical care outcomes have been received for 855 (of 890) patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date. Of these, 398 have died and 457 have been discharged from critical care (Figures 10 and 11). The remaining 35 were last reported to still be receiving critical care.

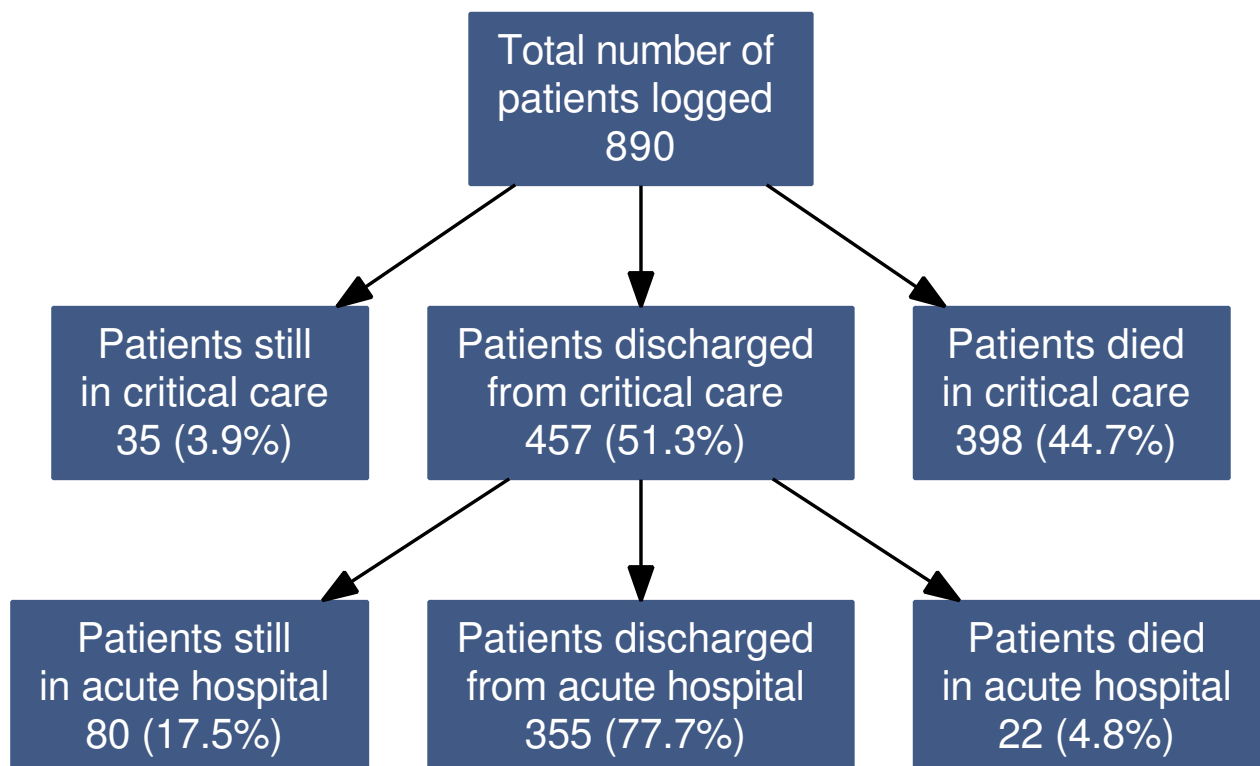
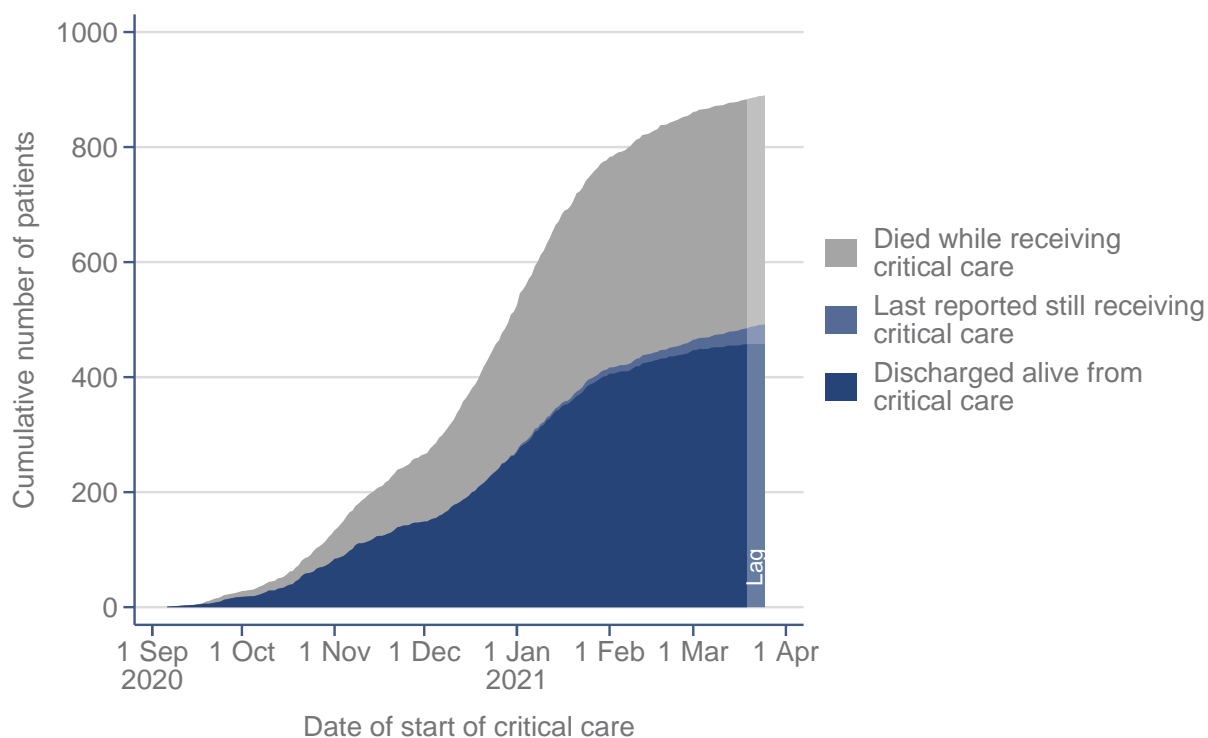


Figure 10. Critical care and acute hospital outcomes

Critical care and acute hospital outcomes for patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date.



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Figure 11. Cumulative outcomes *

Cumulative outcomes for patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date by date of admission to critical care.

* Please note that patients whose outcome data have not been received are assumed to remain in critical care as of 25 March 2021.

Critical care outcome, duration of critical care and organ support for patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date for whom outcomes have been received are summarised in Table 16 and compared with those admitted up to 31 August 2020.

Table 16. Critical care outcome, duration of critical care and organ support

Critical care outcome	Patients with confirmed COVID-19 and outcome received	
	Admitted from 1 Sep (N=890)	Admitted up to 31 Aug (N=403)
Outcome at end of critical care, n (%)		
Discharged	457 (51.3)	250 (62.0)
Died	398 (44.7)	153 (38.0)
Still receiving critical care	35 (3.9)	0 (0.0)
Duration of critical care	(N=854)	(N=403)
Duration of critical care (days) †, median (IQR)		
Survivors	10 (4, 22.5)	15 (6, 27)
Non-survivors	10 (6, 17)	10 (6, 20)
Organ support (Critical Care Minimum Dataset) *	(N=852)	(N=403)
Receipt of organ support, at any point, n (%)		
Advanced respiratory support	603 (70.8)	325 (80.6)
Basic respiratory support only	229 (26.9)	66 (16.4)
No respiratory support	20 (2.3)	12 (3.0)
Advanced cardiovascular support	234 (27.5)	109 (27.0)
Basic cardiovascular support only	611 (71.7)	291 (72.2)
No cardiovascular support	7 (0.8)	3 (0.7)
Renal support	192 (22.5)	123 (30.5)
Liver support	5 (0.6)	0 (0.0)
Neurological support	65 (7.6)	34 (8.4)
Duration of organ support (calendar days), median (IQR)		
Advanced respiratory support	12 (7, 20)	15 (8, 23)
Total (advanced + basic) respiratory support	10.5 (6, 19)	14 (6, 23)
Advanced cardiovascular support	3 (1, 5)	3 (2, 6)
Total (advanced + basic) cardiovascular support	11 (5, 19)	14 (7, 24)
Renal support	6 (3, 14.5)	8 (3, 16)

Please note that the results for patients admitted from 1 September 2020 are biased towards patients with shorter lengths of stay in critical care prior to discharge or death, i.e. those who died or recovered quickly.

* Please see Definitions on page 40.

† Duration of critical care is the total over all critical care admissions for the the same patient and excludes any time spent outside critical care areas (e.g. prior to any readmissions).

Outcomes, duration of critical care and organ support – invasively ventilated first 24 hours

Critical care outcome, duration of critical care and organ support for patients critically ill with confirmed COVID-19 for whom outcomes have been received and who received invasive ventilation during the first 24 hours in critical care admitted from 1 September 2020 to date are summarised in Table 17 and compared with those admitted up to 31 August 2020.

Table 17. Critical care outcome, duration of critical care and organ support (invasively ventilated first 24 hours)

Patients with confirmed COVID-19 invasively ventilated first 24 hours *		
Critical care outcome	Admitted from 1 Sep (N=448)	Admitted up to 31 Aug (N=266)
Outcome at end of critical care, n (%)		
Discharged	177 (39.5)	153 (57.5)
Died	256 (57.1)	113 (42.5)
Still receiving critical care	15 (3.3)	0 (0.0)
Duration of critical care	(N=433)	(N=266)
Duration of critical care (days) †, median (IQR)		
Survivors	16 (10, 34)	21 (13, 31)
Non-survivors	10 (6, 15.5)	11 (6, 20)
Organ support (Critical Care Minimum Dataset) *	(N=432)	(N=266)
Receipt of organ support, at any point, n (%)		
Advanced cardiovascular support	171 (39.6)	81 (30.5)
Basic cardiovascular support only	260 (60.2)	185 (69.5)
No cardiovascular support	1 (0.2)	0 (0.0)
Renal support	130 (30.1)	91 (34.2)
Liver support	2 (0.5)	0 (0.0)
Neurological support	58 (13.4)	25 (9.4)
Duration of organ support (calendar days), median (IQR)		
Advanced respiratory support	11 (7, 19)	15 (9, 24)
Total (advanced + basic) respiratory support	12 (7, 20.5)	16 (9, 27)
Advanced cardiovascular support	3 (1, 5)	3 (2, 6)
Total (advanced + basic) cardiovascular support	12 (7, 21)	17 (9, 27)
Renal support	6 (3, 15)	10 (4, 18)

Please note that the results for patients admitted from 1 September 2020 are biased towards patients with shorter lengths of stay in critical care prior to discharge or death, i.e. those who died or recovered quickly.

* Please see Definitions on page 40.

† Duration of critical care is the total over all critical care admissions for the the same patient and excludes any time spent outside critical care areas (e.g. prior to any readmissions).

Outcomes, duration of critical care and organ support – advanced respiratory support

Critical care outcome, duration of critical care and organ support for patients critically ill with confirmed COVID-19 for whom outcomes have been received and who received advanced respiratory support at any time during their critical care stay admitted from 1 September 2020 to date are summarised in Table 18 and compared with those admitted up to 31 August 2020.

Table 18. Critical care outcome, duration of critical care and organ support (any advanced respiratory support)

Patients with confirmed COVID-19 and any advanced respiratory support *		
Critical care outcome	Admitted from 1 Sep (N=636 †)	Admitted up to 31 Aug (N=325)
Outcome at end of critical care, n (%)		
Discharged	241 (37.9)	180 (55.4)
Died	362 (56.9)	145 (44.6)
Still receiving critical care ‡	33 (5.2)	0 (0.0)
Duration of critical care	(N=603)	(N=325)
Duration of critical care (days) †, median (IQR)		
Survivors	19 (10, 36)	21 (13.5, 32)
Non-survivors	11 (6, 17)	11 (6, 20)
Organ support (Critical Care Minimum Dataset) *	(N=603)	(N=325)
Receipt of organ support, at any point, n (%)		
Advanced cardiovascular support	231 (38.3)	106 (32.6)
Basic cardiovascular support only	371 (61.5)	219 (67.4)
No cardiovascular support	1 (0.2)	0 (0.0)
Renal support	179 (29.7)	113 (34.8)
Liver support	5 (0.8)	0 (0.0)
Neurological support	64 (10.6)	33 (10.2)
Duration of organ support (calendar days), median (IQR)		
Advanced respiratory support	12 (7, 20)	15 (8, 23)
Total (advanced + basic) respiratory support	13 (8, 23)	16 (9, 26)
Advanced cardiovascular support	3 (1, 5)	3 (2, 6)
Total (advanced + basic) cardiovascular support	13.5 (8, 23)	17 (9, 26)
Renal support	6 (3, 15)	9 (4, 18)

Please note that the results for patients admitted from 1 September 2020 are biased towards patients with shorter lengths of stay in critical care prior to discharge or death, i.e. those who died or recovered quickly.

* Please see Definitions on page 40.

† Duration of critical care is the total over all critical care admissions for the the same patient and excludes any time spent outside critical care areas (e.g. prior to any readmissions).

‡ Numbers of patients still receiving critical care estimated based on observed, incomplete organ support data received.

Outcomes, duration of critical care and organ support – basic respiratory support only

Critical care outcome, duration of critical care and organ support for patients critically ill with confirmed COVID-19 for whom outcomes have been received and who received basic respiratory support only during their critical care stay admitted from 1 September 2020 to date are summarised in Table 19 and compared with those admitted up to 31 August 2020.

Table 19. Critical care outcome, duration of critical care and organ support (basic respiratory support only)

Patients with confirmed COVID-19 and basic respiratory support only *		
Critical care outcome	Admitted from 1 Sep (N=234 †)	Admitted up to 31 Aug (N=66)
Outcome at end of critical care, n (%)		
Discharged	193 (82.5)	59 (89.4)
Died	36 (15.4)	7 (10.6)
Still receiving critical care ‡	5 (2.1)	0 (0.0)
Duration of critical care	(N=228)	(N=66)
Duration of critical care (days) †, median (IQR)		
Survivors	5 (3, 8)	5 (2, 8)
Non-survivors	6 (2, 9.5)	3 (2, 8)
Organ support (Critical Care Minimum Dataset) *	(N=229)	(N=66)
Receipt of organ support, at any point, n (%)		
Advanced cardiovascular support	2 (0.9)	1 (1.5)
Basic cardiovascular support only	223 (97.4)	63 (95.5)
No cardiovascular support	4 (1.7)	2 (3.0)
Renal support	11 (4.8)	7 (10.6)
Liver support	0 (0.0)	0 (0.0)
Neurological support	1 (0.4)	0 (0.0)
Duration of organ support (calendar days), median (IQR)		
Total (advanced + basic) respiratory support	5 (3, 8)	4 (3, 6)
Advanced cardiovascular support	2.5 (2, 3)	3 (3, 3)
Total (advanced + basic) cardiovascular support	5 (3, 9)	5 (3, 8)
Renal support	6 (3, 7)	2 (1, 3)

Please note that the results for patients admitted from 1 September 2020 are biased towards patients with shorter lengths of stay in critical care prior to discharge or death, i.e. those who died or recovered quickly.

* Please see Definitions on page 40.

† Duration of critical care is the total over all critical care admissions for the the same patient and excludes any time spent outside critical care areas (e.g. prior to any readmissions).

‡ Numbers of patients still receiving critical care estimated based on observed, incomplete organ support data received.

Outcomes, duration of critical care and organ support – renal support

Critical care outcome, duration of critical care and organ support for patients critically ill with confirmed COVID-19 for whom outcomes have been received and who received renal support at any time during their critical care stay admitted from 1 September 2020 to date are summarised in Table 20 and compared with those admitted up to 31 August 2020.

Table 20. Critical care outcome, duration of critical care and organ support (any renal support)

Patients with confirmed COVID-19 and any renal support *		
Critical care outcome	Admitted from 1 Sep (N=198 †)	Admitted up to 31 Aug (N=123)
Outcome at end of critical care, n (%)		
Discharged	56 (28.3)	52 (42.3)
Died	136 (68.7)	71 (57.7)
Still receiving critical care ‡	6 (3.0)	0 (0.0)
Duration of critical care	(N=192)	(N=123)
Duration of critical care (days) †, median (IQR)		
Survivors	34.5 (14, 47.5)	26.5 (12.5, 44)
Non-survivors	12 (8, 20)	15 (8, 24)
Organ support (Critical Care Minimum Dataset) *	(N=192)	(N=123)
Receipt of organ support, at any point, n (%)		
Advanced respiratory support	179 (93.2)	113 (91.9)
Basic respiratory support only	11 (5.7)	7 (5.7)
No respiratory support	2 (1.0)	3 (2.4)
Advanced cardiovascular support	95 (49.5)	51 (41.5)
Basic cardiovascular support only	96 (50.0)	71 (57.7)
No cardiovascular support	1 (0.5)	1 (0.8)
Liver support	3 (1.6)	0 (0.0)
Neurological support	22 (11.5)	10 (8.1)
Duration of organ support (calendar days), median (IQR)		
Advanced respiratory support	16 (8, 24)	18 (10, 30)
Total (advanced + basic) respiratory support	16 (9, 27)	18 (9, 31)
Advanced cardiovascular support	3 (2, 5)	3 (2, 6)
Total (advanced + basic) cardiovascular support	16 (9, 27)	19 (9, 30)
Renal support	6 (3, 14.5)	8 (3, 16)

Please note that the results for patients admitted from 1 September 2020 are biased towards patients with shorter lengths of stay in critical care prior to discharge or death, i.e. those who died or recovered quickly.

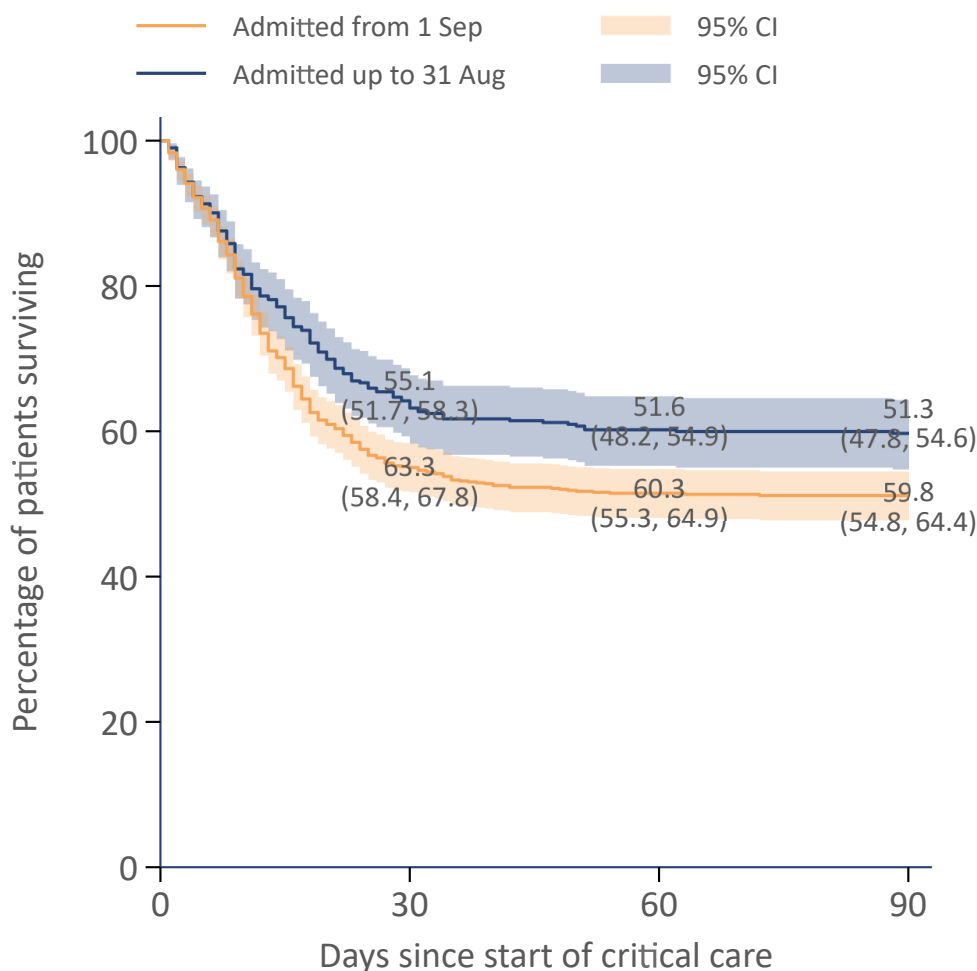
* Please see Definitions on page 40.

† Duration of critical care is the total over all critical care admissions for the the same patient and excludes any time spent outside critical care areas (e.g. prior to any readmissions).

‡ Numbers of patients still receiving critical care estimated based on observed, incomplete organ support data received.

90-day in-hospital outcome

A Kaplan-Meier plot of in-hospital survival to 90 days following admission to critical care for patients critically ill with confirmed COVID-19 admitted from 1 September 2020 to date is shown in Figure 12 and compared with those admitted up to 31 August 2020.



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Admitted from 1 Sep

At risk	886	453	355	214
Died (in hospital)	0	390	418	420
Censored	0	43	113	252

Admitted up to 31 Aug

At risk	403	255	241	239
Died (in hospital)	0	148	160	162
Censored				

Figure 12. In-hospital survival to 90 days following admission to critical care

Kaplan-Meier survival analysis for patients critically ill with confirmed COVID-19. Patients last reported to be still receiving critical care censored on the most recent date of data submission by the treating unit. Patients discharged from acute hospital within 90 days assumed to survive to 90 days. Please note that these survival curves are not adjusted for differences in patient characteristics (see Tables 1-3).

Definitions

Ethnicity is recorded using the ethnic category codes from the 2001 census and grouped as:

- White: White – British; White – Irish; White – any other
- Mixed: Mixed – white and black Caribbean; Mixed – white and black African; Mixed – white and Asian; Mixed – any other
- Asian: Asian or Asian British – Indian; Asian or Asian British – Pakistani; Asian or Asian British – Bangladeshi; Asian or Asian British – any other
- Black: Black or black British – Caribbean; Black or black British – African; Black or black British – any other
- Other: Other ethnic group – Chinese; Any other ethnic group
- Not stated or not recorded

Index of Multiple Deprivation (IMD) is based on the patient's usual residential postcode (assigned at the level of Lower Layer Super Output Area) according to:

- English Index of Multiple Deprivation 2019 for postcodes in England
- Welsh Index of Multiple Deprivation 2019 for postcodes in Wales
- Northern Ireland Multiple Deprivation Measure 2017 for postcodes in Northern Ireland

Body mass index is calculated as the weight in kilograms divided by the height in metres squared. Weight and height values may have been measured or estimated.

Dependency prior to admission to acute hospital is assessed as the best description for the dependency of the patient in the two weeks prior to admission to acute hospital and prior to the onset of the acute illness, i.e. "usual" dependency. It is assessed according to the amount of personal assistance they receive with daily activities (bathing, dressing, going to the toilet, moving in/out of bed/chair, continence and eating).

Very severe comorbidities must have been evident within the six months prior to critical care and documented at or prior to critical care:

- Cardiovascular: symptoms at rest
- Respiratory: shortness of breath with light activity or home ventilation
- Renal: renal replacement therapy for end-stage renal disease
- Liver: biopsy-proven cirrhosis, portal hypertension or hepatic encephalopathy
- Metastatic disease: distant metastases
- Haematological malignancy: acute or chronic leukaemia, multiple myeloma or lymphoma
- Immunocompromise: chemotherapy, radiotherapy or daily high dose steroid treatment in previous six months, HIV/AIDS or congenital immune deficiency

Invasive ventilation during the first 24 hours was defined as mechanical ventilation (identified by the recording of a ventilated respiratory rate, indicating that all or some of the breaths or a portion of the breaths were delivered by a mechanical device) and sedation (receiving continuous or intermittent doses of agents to produce and maintain a continuous decreased level of consciousness) at any time during the first 24 hours and not reported as having zero days of advanced respiratory support.

Organ support is recorded as the number of calendar days (00:00-23:59) on which the support was received at any time, defined as:

- Advanced respiratory: invasive ventilation, BPAP via trans-laryngeal tube or tracheostomy, CPAP via trans-laryngeal tube, extracorporeal respiratory support
- Basic respiratory: >50% oxygen by face mask, close observation due to potential for acute deterioration, physiotherapy/suction to clear secretions at least two-hourly, recently extubated after a period of mechanical ventilation, mask/hood CPAP/BPAP, non-invasive ventilation, CPAP via a tracheostomy, intubated to protect airway
- Advanced cardiovascular: multiple IV/rhythm controlling drugs (at least one vasoactive), continuous observation of cardiac output, intra-aortic balloon pump, temporary cardiac pacemaker
- Basic cardiovascular: central venous catheter, arterial line, single IV vasoactive/ rhythm controlling drug
- Renal: acute renal replacement therapy, renal replacement therapy for chronic renal failure where other organ support is received
- Liver: management of coagulopathy and/or portal hypertension for acute on chronic hepatocellular failure or primary acute hepatocellular failure
- Neurological: central nervous system depression sufficient to prejudice airway, invasive neurological monitoring, continuous IV medication to control seizures, therapeutic hypothermia

Publications

The following publications, based on Case Mix Programme data for patients critically ill with confirmed COVID-19, are published, in press or in preprint:

- Richards-Belle A, Orzechowska I, Doidge J, Thomas K, Harrison DA, Koelewyn A, Christian MD, Shankar-Hari M, Rowan KM, Gould DW. Critical care outcomes, for the first 200 patients with confirmed COVID-19, in England, Wales and Northern Ireland: a report from the ICNARC Case Mix Programme. *J Intensive Care Soc* 2020; doi:[10.1177/1751143720961672](https://doi.org/10.1177/1751143720961672)
- Richards-Belle A, Orzechowska I, Gould DW, Thomas K, Doidge JC, Mouncey PR, Christian MD, Shankar-Hari M, Harrison DA, Rowan KM. COVID-19 in critical care: epidemiology of the first epidemic wave across England, Wales and Northern Ireland. *Intensive Care Med* 2020; 46:2035-47. doi:[10.1007/s00134-020-06267-0](https://doi.org/10.1007/s00134-020-06267-0)
- Ferrando-Vivas P, Doidge J, Thomas K, Gould DW, Mouncey P, Shankar-Hari M, Young JD, Rowan KM, Harrison DA. Prognostic Factors for 30-day Mortality in Critically Ill Patients with Coronavirus Disease 2019: An Observational Cohort Study. *Crit Care Med* 2021; 49:102-11. doi:[10.1097/CCM.0000000000004740](https://doi.org/10.1097/CCM.0000000000004740)
- Doidge JC, Gould DW, Ferrando-Vivas P, Mouncey PR, Thomas K, Shankar-Hari M, Harrison DA, Rowan KM. Trends in intensive care for patients with COVID-19 in England, Wales and Northern Ireland. *Am J Respir Crit Care Med* 2021; 203:565-74. doi:[10.1164/rccm.202008-3210C](https://doi.org/10.1164/rccm.202008-3210C)
- Ferrando-Vivas P, Doidge J, Thomas K, Gould DW, Mouncey P, Shankar-Hari M, Young JD, Rowan KM, Harrison DA. Development and validation of a prediction model for 28-day in-hospital mortality in critically ill patients with COVID-19. *Preprints.org* 2021; doi:[10.20944/preprints202102.0059.v1](https://doi.org/10.20944/preprints202102.0059.v1)
- Harrison DA, Gould DW, Rowan KM. Potential impact of the UK vaccination strategy on the numbers of patients becoming critically ill with COVID-19. *OSF Preprints* 2021; doi:[10.31219/osf.io/yks8c](https://doi.org/10.31219/osf.io/yks8c)

The following publications, based on external data sources linked with Case Mix Programme data for patients critically ill with confirmed COVID-19, are published, in press or in preprint:

- Hippisley-Cox J, Young D, Coupland C, et al. Risk of severe COVID-19 disease with ACE inhibitors and angiotensin receptor blockers: cohort study including 8.3 million people. *Heart* 2020; 106:1503-11. doi:[10.1136/heartjnl-2020-317393](https://doi.org/10.1136/heartjnl-2020-317393)
- Pairo-Castineira E, Clohisey S, Klaric L, et al. Genetic mechanisms of critical illness in Covid-19. *Nature* 2021; 591:92-8. doi:[10.1038/s41586-020-03065-y](https://doi.org/10.1038/s41586-020-03065-y)
- Forbes H, Morton CE, Bacon S, et al. Association between living with children and outcomes from covid-19: OpenSAFELY cohort study of 12 million adults in England. *BMJ* 2021; 372:n628. doi:[10.1136/bmj.n628](https://doi.org/10.1136/bmj.n628)
- Aveyard P, Gao M, Lindson N, et al. Association between pre-existing respiratory disease and its treatments and severe COVID-19: population cohort study. *Lancet Respir Med*, in press.
- Mathur R, Rentsch CT, Morton C, et al. Ethnic differences in COVID-19 infection, hospitalisation, and mortality: an OpenSAFELY analysis of 17 million adults in England. *medRxiv* 2020; doi:[10.1101/2020.09.22.20198754](https://doi.org/10.1101/2020.09.22.20198754)
- Patone M, Thomas K, Hatch R, et al. Analysis of severe outcomes associated with the SARS-CoV2 Variant of Concern 202012/01 in England using ICNARC Case Mix Programme and QResearch databases. *medRxiv* 2021; doi:[10.1101/2021.03.11.21253364](https://doi.org/10.1101/2021.03.11.21253364)

Acknowledgement

Please acknowledge the source of these data in all future presentations (oral and/or written) as follows:

“These data derive from the ICNARC Case Mix Programme Database. The Case Mix Programme is the national clinical audit of patient outcomes from adult critical care coordinated by the Intensive Care National Audit Research Centre (ICNARC). For more information on the representativeness and quality of these data, please contact ICNARC.”